

## MARYLAND STATE FAMILY PLANNING TITLE X PROGRAM REVIEW TOOL

Date \_\_\_\_\_

Clinic/Delegate Agency \_\_\_\_\_

Clinic Contact \_\_\_\_\_

Reviewer \_\_\_\_\_

### Introduction:

In 2014, the Office of Population Affairs (OPA) released updated Title X family planning program guidelines. These Guidelines consist of two parts:

1. *The Title X Program Requirements*, which lays out the Federal statutory and regulatory requirements of the Title X program.
2. *Providing Quality Family Planning Services: Recommendations of CDC and the U.S. Office of Population Affairs (QFP)*, which provides clinical recommendations for how to provide family planning services in a manner that is consistent with the best available scientific evidence.

In 2015, the Maryland State Family Planning Program released the updated Maryland Family Planning and Reproductive Health Program Administrative Guidelines.

This tool describes strategies that delegates may use to operationalize applicable Title X statutory and regulatory requirements and lays out the minimum expectations for compliance. The document also illustrates how a delegate can implement QFP in a way that ensures quality care is provided throughout the Title X project.

There are two types of assessments that will be generated by the OFCHS/delegate upon completion of the program review tool:

**1.) Title X Program Requirements Assessment: Met/Not Met/NA**

This assessment relates to the delegate's compliance with the statute and regulations. For these requirements, the delegate will receive an assessment of compliance and will receive a rating of "met", "not met", or "N/A" (not applicable). The evidence that the minimum criteria have been met will be determined based on both delegate records and observation at delegate service sites as part of the monitoring process. Delegates will be evaluated using the list of evidence items in the implementation strategy column. These are minimum elements that the delegate should have on site or otherwise readily available as evidence that the project meets requirements. Evidence may include but is not limited to, policies, procedures, protocols, documentation of training, or any other form of documentation that substantiates that the project is operating in accordance with the Title X Program Requirements.

**2.) QFP Quality Assessment: Highly Developed, Developed, Being Developed or Needs Development**

This assessment reflects the extent to which the delegate has implemented key aspects of QFP within each item. Sections within the document identify where there is a relationship between the Program Requirements and QFP. Delegates will be assessed using the list of items in the implementation column. Quality assessments will be determined based on the number of items demonstrated by the delegate. These examples do not represent an exhaustive list and delegates may propose additional items. The color-coded assessment will serve as a tool for the OFCHS/delegate to recognize achievement in the individual sections assessed as well as identify areas in need of improvement and/or technical assistance.

<b>Quality Assessment</b>	
<b>Highly Developed</b>	<b>All Quality Indicators Met and Evidence of Best Practices or Highly Innovative Approaches</b>
<b>Fully Developed</b>	<b>All Quality Indicators Met</b>
<b>Partially Developed</b>	<b>Half or more Quality Indicators Met</b>
<b>Being Developed</b>	<b>One or More but less than half of Quality Indicators Met</b>
<b>Needs Development</b>	<b>No Quality Indicators Met</b>

**Definitions:**

<b>TERM</b>	<b>DEFINITION</b>
Title X Program Requirement	Requirements applicable to the Title X program, as set out in the Title X statute and implementing regulations (42 CFR part 59, subpart A), and in other applicable Federal statutes, regulations and policies.

**Maryland State Family Planning Title X Program Review Tool - 2018**

Implementation Strategy	Implementation strategy includes the delegate’s mechanism for ensuring compliance with Title X requirements. This includes providing evidence on site or otherwise readily available to document and demonstrate that the project meets requirements. The examples listed in the program review tool do not represent an exhaustive list. Evidence may include but is not limited to, policies, procedures, protocols, documentation of training, or any other form of documentation that substantiates that the project is operating in accordance with the Title X Program Requirements and Recommendations for Providing Quality Family Planning Services (QFP).
Family Planning Services	Services that are directly related to preventing unintended pregnancies as well as achieving planned pregnancies that result in healthy birth outcomes. This includes contraceptive services, pregnancy testing and counseling, services to assist with achieving pregnancy, basic infertility services, STD services, and other preconception health services. These services should be offered to both women and men in accordance with QFP. Title X providers should be trained and equipped to offer these services.
Related Preventive Health Services	Services that are considered to be beneficial to reproductive health, are closely linked to family planning services, and are appropriate to deliver in the context of a family planning visit but do not contribute directly to achieving or preventing pregnancy (e.g., breast and cervical cancer screening). Title X providers should be trained and equipped to offer these services.
Other Preventive Health Services	These include other preventive health services for women and men that are not listed above. Screening for lipid disorders, skin cancer, colorectal cancer, or osteoporosis are examples. Although important in the context of primary care, these have no direct link to family planning services. Clients should be provided referrals for these as well as other primary care services, but they should not be considered a Title X service.

**Maryland State Family Planning Title X Program Review Tool**

**8. Project Management and Administration**

Title X Program Requirement	Implementation Strategy	Assessment																														
<p><b>8.1 Voluntary Participation</b>                      Family planning services are to be provided solely on a voluntary basis (Sections 1001 and 1007, PHS Act; 42 CFR 59.5 (a)(2)).</p> <p>Clients cannot be coerced to accept services or to use or not use any particular method of family planning (42 CFR 59.5 (a)(2)).</p>	<p>Delegates should institutionalize administrative procedures (i.e., staff training, clinical protocols, and consent forms) to ensure clients receive services on a voluntary basis.</p> <p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has written policies and procedures that specify services are to be provided on a voluntary basis.</li> <li>2. Documentation at service sites demonstrates (e.g., staff circulars, training curriculum and records) staff has been informed at least once during their period of employment that services must be provided on a voluntary basis.</li> <li>3. Administrative policies used by service sites include a written statement that clients may not be coerced to use contraception, or to use any particular method of contraception or service.</li> <li>4. General consent forms at service sites inform clients that services are provided on a voluntary basis.                             <ol style="list-style-type: none"> <li>4a. Record Review at service sites demonstrate that each client has signed a general consent form and has received written or other assurance that services are voluntary.</li> </ol> </li> </ol> <p><a href="#">LINK TO QFP:</a>                      A core premise of <i>Recommendations for Providing Quality Family Planning Services</i> is that quality</p>	<p>1. Delegate Policies</p> <table border="1" data-bbox="1430 412 1885 488"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p>Delegate Oversight</p> <p>2. Staff Training</p> <table border="1" data-bbox="1430 667 1885 743"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p>3. Service Site Policies</p> <table border="1" data-bbox="1430 883 1885 959"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p>4. Consent Forms</p> <table border="1" data-bbox="1430 1099 1885 1175"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p>4a. Record Review</p> <table border="1" data-bbox="1430 1354 1885 1430"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														

	<p>services are client-centered, which includes providing services on a voluntary basis. The key principles of providing quality, client-centered counseling include: 1) establish and maintain rapport with the client, 2) assess the client’s needs and personalize discussions accordingly, 3) work with the client interactively to establish a plan, 4) provide information that can be understood and retained by the client, and 5) confirm client understanding. These principles are useful when developing counseling protocols that ensure voluntary participation. (See Appendix C for additional detail).</p> <p>Quality Assessment:                  1. Observation of counseling process, including I&amp;E material provided, at service sites demonstrates that the five principles of quality counseling are utilized when providing family planning services.</p>	<p>Comments:</p> <table border="1" data-bbox="1430 483 1892 932"> <thead> <tr> <th>QFP elements documents by reviewer</th> <th>Quality Rating</th> </tr> </thead> <tbody> <tr> <td>All met +</td> <td><b>Highly Developed</b></td> </tr> <tr> <td>All met</td> <td><b>Fully Developed</b></td> </tr> <tr> <td>Half or More met</td> <td><b>Partially Developed</b></td> </tr> <tr> <td>One or More but less than half</td> <td><b>Being Developed</b></td> </tr> <tr> <td>None</td> <td><b>Needs Development</b></td> </tr> </tbody> </table>	QFP elements documents by reviewer	Quality Rating	All met +	<b>Highly Developed</b>	All met	<b>Fully Developed</b>	Half or More met	<b>Partially Developed</b>	One or More but less than half	<b>Being Developed</b>	None	<b>Needs Development</b>
QFP elements documents by reviewer	Quality Rating													
All met +	<b>Highly Developed</b>													
All met	<b>Fully Developed</b>													
Half or More met	<b>Partially Developed</b>													
One or More but less than half	<b>Being Developed</b>													
None	<b>Needs Development</b>													
<p>A client’s acceptance of family planning services must not be a prerequisite to eligibility for, or receipt of, any other services, assistance from, or participation in any other program that is offered by the grantee or sub-recipient (Section 1007, PHS Act; 42 CFR 59.5 (a)(2)).</p>	<p>Delegate should institutionalize administrative procedures (e.g., staff training, clinical protocols, and consent forms) to ensure clients’ receipt of family planning services is not used as a prerequisite to receipt of other services from the service site.</p> <p>Evidence that this requirement has been met includes:                  1. The delegate has a written policy that prohibits their service sites, and any sub-vendor service sites from making the acceptance of family</p>	<p>1. Delegate Policies</p> <table border="1" data-bbox="1430 1224 1885 1300"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

	<p>planning services a prerequisite to the receipt of any other services.</p> <ol style="list-style-type: none"> <li>2. Documentation (e.g., staff circulars, training curriculum) indicates staff has been informed at least once during their period of employment that a client's receipt of family planning services may not be used as a prerequisite to receipt of any other services offered by the service site.</li> <li>3. Administrative policies at service sites include a written statement that receipt of family planning services is not a prerequisite to receipt of any other services offered by the service site.</li> <li>4. General consent forms state that receipt of family planning services is not a prerequisite to receipt of any other services offered by the service site.</li> <li>5. Medical chart review demonstrates that each client has signed a general consent form stating receipt of family planning services is not a prerequisite to receipt of any other services offered.</li> </ol>	<p><b>2. Staff Training</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p><b>3. Service Site Policies</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p><b>4. Consent Forms</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p><b>5. Chart Review</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						

<p>Personnel working within the family planning project must be informed that they may be subject to prosecution if they coerce or try to coerce any person to undergo an abortion or sterilization procedure (Section 205, Public Law 94-63, as set out in 42 CFR 59.5(a)(2) footnote 1).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has written policies and procedures that require that all staff of the delegate, service sites, and sub-vendors is informed that they may be subject to prosecution if they coerce or try to coerce any person to undergo an abortion or sterilization procedure.</li> <li>2. Documentation at the delegate level demonstrates that staff has been informed at least once during their period of employment that they are subject to this requirement.</li> <li>3. Documentation at service sites and sub-vendors (e.g., staff circulars, training records) demonstrates that staff has been informed at least once during their period of employment that they are subject to this requirement.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Documentation</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>3. Oversight Documentation</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p><b>8.2 Prohibition of Abortion</b> Title X grantees and sub-recipients must be in full compliance with Section 1008 of the Title X statute and 42 CFR 59.5(a)(5), which prohibit abortion as a method of family planning.</p>	<p>Systems must be in place to assure adequate separation of any non-Title X activities from the Title X project.</p> <p>Delegate has documented processes to ensure that they and their sub-vendors are in compliance with Section 1008. Delegates should include language in sub-vendor contracts addressing this requirement.</p> <p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has written policies and procedures that prohibit service sites and sub-vendors from providing abortion as part of the Title X project.</li> <li>2. Delegate includes language in sub-vendor contracts addressing this requirement.</li> </ol>	<p>Assessment</p> <p>1. Delegate Policies</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Sub-vendor contracts (if applicable)</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

	<p>3. Financial documentation at service sites demonstrates that Title X funds are not being used for abortion services and adequate separation exists between Title X and non-Title X activities.</p>	<p>3. Oversight</p> <table border="1"> <tr> <td data-bbox="1457 228 1629 261">Met</td> <td data-bbox="1629 228 1835 261">Not Met</td> <td data-bbox="1835 228 1919 261">N/A</td> </tr> <tr> <td data-bbox="1457 261 1629 302"><input type="checkbox"/></td> <td data-bbox="1629 261 1835 302"><input type="checkbox"/></td> <td data-bbox="1835 261 1919 302"><input type="checkbox"/></td> </tr> <tr> <td colspan="3" data-bbox="1457 302 1919 370">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
Comments:											

Title X Program Requirement	Implementation Strategy	Assessment									
<p><b>8.3 Structure and Management</b>                      8.3.1 The grantee must have a written agreement with each sub-recipient and establish written standards and guidelines for all delegated project activities consistent with the appropriate section(s) of the Title X Program Requirements, as well as other applicable requirements (45 CFR parts 74 and 92).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has written agreements documenting that any entity(s), i.e. sub-vendors, carrying out the scope of the contract do so in accordance with Title X and other applicable federal requirements.</li> </ol>	<p>1. Delegate agreements (if applicable)</p> <table border="1"> <tr> <td data-bbox="1457 651 1629 683">Met</td> <td data-bbox="1629 651 1835 683">Not Met</td> <td data-bbox="1835 651 1919 683">N/A</td> </tr> <tr> <td data-bbox="1457 683 1629 724"><input type="checkbox"/></td> <td data-bbox="1629 683 1835 724"><input type="checkbox"/></td> <td data-bbox="1835 683 1919 724"><input type="checkbox"/></td> </tr> <tr> <td colspan="3" data-bbox="1457 724 1919 792">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
Comments:											

<p>8.3.2 If a sub-recipient wishes to subcontract any of its responsibilities or services, a written agreement that is consistent with Title X Program Requirements and approved by the grantee must be maintained by the sub-recipient (45 CFR parts 74 and 92).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has a signed agreement with any sub-vendor who subcontracts for responsibilities or services, requiring the sub-vendor to include compliance with Title X requirements in their subcontracts.</li> <li>2. Documentation shows the Grantee has approved Delegates' sub-vendor subcontracts.</li> <li>3. Review of Delegate and sub-vendor monitoring reports demonstrates that the delegate ensures that the sub-vendor is monitoring the entity for compliance with Title X requirements.</li> </ol>	<p>1. Delegate Documentation-signed agreements</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Delegate Documentation-approvals</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>3. Delegate Monitoring</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
<p>8.3.3 The grantee must ensure that all services purchased for project participants will be authorized by the project director or his designee on the project staff (42 CFR 59.5(b)(7)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Policies clearly indicate the approval process for any services that are purchased for participants.</li> <li>2. Documentation of purchases demonstrates that the delegate's established policies and procedures are followed.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Review of Purchases</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:											
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p>8.3.4 The grantee must ensure that services provided through a contract or other similar arrangement are paid for under agreements that include a schedule of rates and payment procedures maintained by the grantee. The grantee must be prepared to substantiate that these rates are reasonable and necessary (42 CFR 59.5(b)(9)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate contracts clearly indicate the schedule of rates and payment procedures for services.</li> <li>2. Delegate can substantiate that the rates are reasonable and necessary. This includes demonstrating the process and/or rationale used to determine payments, examples of financial records, applicable internal controls.</li> </ol>	<p>1. Delegate contracts</p> <table border="1" data-bbox="1459 516 1915 589"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>2. Process for determining rates</p> <table border="1" data-bbox="1459 732 1915 805"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
<p>8.3.5 Sub-recipient agencies must be given an opportunity to participate in the establishment of ongoing grantee policies and guidelines (42 CFR 59.5 (a)(10)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies identify the mechanism(s) used to be involved and involve sub-vendor agencies in the development of policies and guidelines.</li> <li>2. Documentation exists and may include meeting minutes, conference calls, and webinars that demonstrates that delegates and sub-vendors participate in this process as indicated in the delegate policy.</li> </ol>	<p>1. Delegate Policies</p> <table border="1" data-bbox="1459 959 1915 1032"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>2. Documentation</p> <table border="1" data-bbox="1459 1175 1915 1248"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

<p>8.3.6 The grantee and each sub-recipient must maintain a financial management system that meets Federal standards, as applicable, as well as any other requirements imposed by the Notice of Award, and which complies with Federal standards that will support effective control and accountability of funds. as required (45 CFR parts 74.20 and 92.20).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate financial policies and procedures can be referenced back to federal regulations as applicable.</li> <li>2. Delegate financial records and oversight documentation demonstrates that the financial management practices within all project sites are aligned with Title X and other applicable regulations and grants requirements.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Documentation-Oversight</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				



Title X Program Requirement																																
<p><b>8.4 Charges, Billing, and Collections</b></p> <p>8.4.1 Clients whose documented income is at or below 100% of the Federal Poverty Level (FPL) must not be charged, although projects must bill all third parties authorized or legally obligated to pay for services (Section 1006(c)(2), PHS Act; 42 CFR 59.5(a)(7)).</p> <p>Although not required to do so, grantees that have lawful access to other valid means of income verification because of the client’s participation in another program may use those data rather than re-verify income or rely solely on the client’s self-report.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has policies and procedures assuring that clients whose documented income is at or below 100% FPL are not charged for services and that third party payers are billed.</li> <li>2. Financial documentation at the service site indicates clients whose documented income is at or below 100% FPL are not charged for services.</li> <li>3. Financial documentation at the service site indicates that if a third party is authorized or legally obligated to pay for services, the project has billed accordingly.</li> <li>4. Service sites follow a written policy and procedure for verifying client income that is aligned with Title X requirements.</li> <li>5. Service site policy and procedures for verifying client income does not present a barrier to receipt of services.</li> </ol>	<p>1. Delegate Policies</p> <table border="1" data-bbox="1459 375 1921 451"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>2. Financial Documentation-charges</p> <table border="1" data-bbox="1459 594 1921 670"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>3. Financial Documentation- Third Party Billing</p> <table border="1" data-bbox="1459 846 1921 922"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>4. Delegate Policies for Verifying Income</p> <table border="1" data-bbox="1459 1065 1921 1141"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>5. Delegate Policy and Procedures</p> <table border="1" data-bbox="1459 1284 1921 1360"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														

<p>8.4.2 A schedule of discounts, based on ability to pay, is required for individuals with family incomes between 101% and 250% of the Federal Poverty Level (FPL) (42 CFR 59.5(a)(8)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has policies and procedures requiring that a schedule of discounts be developed for services provided in the project and updated periodically to be in line with the FPL.</li> <li>2. Service site documentation indicates client income is assessed and discounts are appropriately applied to the cost of services.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation at Service Site</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.4.3 Fees must be waived for individuals with family incomes above 100% of the FPL who, as determined by the service site project director, are unable, for good cause, to pay for family planning services (42 CFR 59.2).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has policies and procedures that have a process to refer clients (or financial records) to the service site director for review and consideration of waiver of charges.</li> <li>2. Documentation at the service site demonstrates a determination is made by the service site director, is documented and the client is informed of the determination.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation at Service Site</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.4.4. For persons from families whose income exceeds</p>	<p>Evidence that this requirement has been met includes:</p>	<p>1. Delegate Policies and Procedures</p>																		

**Maryland State Family Planning Title X Program Review Tool - 2018**

<p>250% of the FPL, charges must be made in accordance with a schedule of fees designed to recover the reasonable cost of providing services. (42 CFR 59.5(a)(8)).</p>	<ol style="list-style-type: none"> <li>1. Delegate has documented policies and procedures requiring service sites and sub-vendors to have a sound rationale and process for determining the cost of services.</li> <li>2. Delegate financial records indicate client income is assessed and that charges are applied appropriately to recover the cost of services.</li> </ol>	<table border="1"> <tr> <td align="center">Met</td> <td align="center">Not Met</td> <td align="center">N/A</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation at Service Site</p> <table border="1"> <tr> <td align="center">Met</td> <td align="center">Not Met</td> <td align="center">N/A</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.4.5 Eligibility for discounts for unemancipated minors who receive confidential services must be based on the income of the minor (42 CFR 59.2).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and require service sites to have a process for determining whether a minor is seeking confidential services and stipulates that charges to adolescents seeking confidential services will be based solely on the adolescent's income.</li> <li>2. Client records indicate appropriate implementation of policy.</li> </ol>	<p>1. Delegate Policies-Minor Confidentiality</p> <table border="1"> <tr> <td align="center">Met</td> <td align="center">Not Met</td> <td align="center">N/A</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight-</p> <table border="1"> <tr> <td align="center">Met</td> <td align="center">Not Met</td> <td align="center">N/A</td> </tr> <tr> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> <td align="center"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

<p>8.4.6 Where there is legal obligation or authorization for third party reimbursement, including public or private sources, all reasonable efforts must be made to obtain third party payment without the application of any discounts (42 CFR 59.5(a)(9)).</p> <p>Family income should be assessed before determining whether copayments or additional fees are charged. With regard to insured clients, clients whose family income is at or below 250% FPL should not pay more (in copayments or additional fees) than what they would otherwise pay when the schedule of discounts is applied.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and procedures require that all project sites bill insurance in accordance with Title X regulations.</li> <li>2. The delegate can demonstrate that it (and/or its sub-vendors) has contracts with insurance providers, including public and private sources.</li> <li>3. Financial records indicate that clients with family incomes between 101%-250% FPL do not pay more in copayments or additional fees than they would otherwise pay when the schedule of discounts is applied.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Contracts with 3<sup>rd</sup> Parties</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>3. Charges and Collection Records at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p>8.4.7 Where reimbursement is available from Title XIX or Title XX of the Social Security Act, a written agreement with the Title XIX or the Title XX state agency at either the grantee level or sub-recipient agency is required (42 CFR 59.5(a)(9)]</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Grantee maintains written agreements and ensures they are kept current, as appropriate.</li> <li>2. Documentation indicates that the grantee maintains oversight of its delegate's agreements with Title XIX and/or Title XX.</li> </ol>	<p>1. Delegate Policies and Agreements</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.4.8 Reasonable efforts to collect charges without jeopardizing client confidentiality must be made.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has policies addressing collection by service sites that include safeguards that protect client confidentiality, particularly in cases where sending an explanation of benefits could breach client confidentiality.</li> <li>2. Documentation demonstrates that clients' services remain confidential when billing and collecting payments.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation at Service Site</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

<p>8.4.9 <u>Voluntary</u> donations from clients are permissible; however, clients must not be pressured to make donations, and donations must not be a prerequisite to the provision of services or supplies.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and procedures indicate if the project service sites may request and/or accept donations.</li> <li>2. Onsite documentation and observation demonstrates that clients are not pressured to make donations and that donations are not a prerequisite to the provision of services or supplies. Observation may include signage, financial counseling scripts, or other evidence.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation at Service Site</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

Title X Program Requirement	Implementation Strategy	Assessment																		
<p><b>8.5 Project Personnel</b></p> <p>8.5.1 Grantees and sub-recipients are obligated to establish and maintain personnel policies that comply with applicable Federal and State requirements, including Title VI of the Civil Rights Act, Section 504 of the Rehabilitation Act of 1973, Title I of the Americans with Disabilities Act, and the annual appropriations language.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has written policies and procedures in place that provide evidence that there is no discrimination in personnel administration at its organizations and within its sub-vendor network. These policies should include, but are not to be limited to, staff recruitment, selection, performance evaluation, promotion, termination, compensation, benefits, and grievance procedures.</li> <li>2. There is evidence that the delegate monitors sub-vendors to ensure compliance with this requirement.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight Documentation</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.5.2 Project staff should be broadly representative of all significant elements of the population to be served by the project, and should be</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Written delegate policies and procedures that address how the project operationalizes cultural competency.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Unmet</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Unmet	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:											
Met	Unmet	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

<p>sensitive to, and able to deal effectively with, the cultural and other characteristics of the client population (42 CFR 59.5 (b)(10)).</p>	<p>2. Documentation at service sites includes records of cultural competence training, in-services, client satisfaction surveys.</p>	<p>2. Documentation at Service Site</p> <table border="1"> <tr> <td>Satisfactory</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Satisfactory	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:											
Satisfactory	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.5.3 Projects must be administered by a qualified project director.</p> <p>Change in Status, including Absence of Principle Investigator/Project Director and Other Key Personnel requires pre-approval by the Office of Grants Management. For more information, see HHS Grants Policy Statement, 2007 Section II-54.</p>	<p>Evidence that this requirement has been met includes:</p> <p>1. Documentation that indicates any changes in project director have been submitted to the Office of Family and Community Health Services.</p>	<p>1. OFCHS Documentation (if applicable)</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:											
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>8.5.4 Projects must provide that family planning medical services will be performed under the direction of a physician with special training or experience in family planning (42 CFR 59.5 (b)(6)).</p>	<p>Evidence that this requirement has been met includes:</p> <p>1. Delegate organization provides written evidence that the medical/clinical services operates under the direction of a physician</p> <p>2. There is some evidence (e.g. medical advisory committee, board, and staff meetings) indicating involvement of the Medical Director in program operations.</p> <p>3. Curriculum vitae of the Medical Director indicates special training or experience in family planning.</p>	<p>1. Delegate Organization Charts</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation-MD Oversight</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

	<p>4. Clinic protocols for the entire project are approved by the Medical Director.</p>	<p>3. CV of Medical Director</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>4. Protocols approved by Medical Director</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
<p>8.5.5 Appropriate salary limits will apply as required by law.</p>	<p>Evidence that this requirement has been met includes:</p> <p>1. Documentation such as budgets and payroll records that indicate that the delegate is complying with required salary limits as documented in the most current family planning services Funding Opportunity Announcement (FOA).</p>	<p>1. Documentation</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

Title X Program Requirement	Implementation Strategy	Assessment																		
<p><b>8.6 Staff Training and Project Technical Assistance</b></p> <p>8.6.1 Projects must provide for the orientation and in-service training of all project personnel, including the staff of sub-recipient agencies and service sites (42 CFR 59.5(b)(4)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate records demonstrate the assessment(s) of staff training needs and a training plan that addresses key requirements of the Title X program and priority areas.</li> <li>2. Delegate maintains written records of orientation, in-service and other training attendance by project personnel.</li> <li>3. Delegate documentation demonstrates oversight of sub-vendor training plans and activities.</li> </ol>	<p>1. Delegate Documentation</p> <table border="1" data-bbox="1459 305 1915 375"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Training Documentation</p> <table border="1" data-bbox="1459 521 1915 591"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>3. Delegate Oversight</p> <table border="1" data-bbox="1459 737 1915 807"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
<p>8.6.2 The project’s orientation/in-service training includes training on Federal/State requirements for reporting or notification of child abuse, child molestation, sexual abuse, rape or incest, as well as on human trafficking</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate documentation includes evidence of staff training within the current project period specific to this area which may include attendance records and certificates.</li> <li>2. Delegate documentation demonstrates oversight of sub-vendor training activities for these topics.</li> </ol>	<p>1. Delegate Documentation</p> <table border="1" data-bbox="1459 993 1915 1063"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Delegate Oversight</p> <table border="1" data-bbox="1459 1209 1915 1279"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		

<p>8.6.3 The project’s orientation/in-service training includes training on involving family members in the decision of minors to seek family planning services and on counseling minors on how to resist being coerced into engaging in sexual activities.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies ensure that staff has received training within the current project period on state-specific reporting/notification requirements.</li> <li>2. Documentation includes training attendance records/certificates which indicate that training on family involvement counseling and sexual coercion counseling has been provided.</li> <li>3. Delegate documentation demonstrates oversight of sub-vendor training activities on these topics.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Delegate Documentation</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>3. Delegate Oversight</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

Title X Program Requirement	Implementation Strategy	Assessment																		
<p><b>8.7 Planning and Evaluation</b> Grantees must ensure that the project is competently and efficiently administered (42 CFR 59.5 (b) (6) and (7)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate records demonstrate that the results of at least one needs assessment were used to develop the competing grant application.</li> <li>2. Delegate has a written plan for monitoring the delivery of all services described in approved grant application including monitoring of sub-vendors.</li> <li>3. Delegate records document periodic assessment of work plan progress, including work plan revisions when needed.</li> <li>4. Delegate collects and submits data for the Family Planning Annual Report (FPAR) in a timely, complete and accurate manner.</li> </ol> <p><b>LINK TO QFP:</b> When designing evaluations, projects should follow the Recommendations for Providing Quality Family Planning Services, which defines what services to provide and how to do so and thereby provides a framework by which program evaluations can be developed. Projects should also follow the QFP that defines ‘quality’ care and describes how to conduct quality improvement processes so that performance is monitored and improved on an ongoing basis. QI activities should be overseen by the delegate and occur at both the delegate and sub-recipient levels.</p> <p>Quality Assessment:</p> <ol style="list-style-type: none"> <li>1. Delegate demonstrates use of FPAR data to calculate for delegate level the percentage of</li> </ol>	<p>1. Delegate Documentation</p> <table border="1" data-bbox="1459 305 1919 375"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>2. Delegate Monitoring Plan</p> <table border="1" data-bbox="1459 521 1919 591"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>3. Data Submission</p> <table border="1" data-bbox="1459 737 1919 807"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		

	<p>adolescent and adult women at risk of unintended pregnancy who use: (a) a most or moderately effective method of contraception, and (b) long-acting reversible methods of contraception.</p> <ol style="list-style-type: none"> <li>2. Delegate project records document the use of ongoing (i.e., at least annually) quality improvement processes related to the contraceptive use measure (see #1 above).</li> <li>3. Delegate demonstrates use of FPAR data to calculate for all service sites the percentage of adolescent and adult women at risk of unintended pregnancy who use: (a) a most or moderately effective method of contraception, and (b) long-acting reversible methods of contraception.</li> <li>4. Delegate project records document the use of ongoing (i.e., at least annually) quality improvement processes related to the contraceptive use measure across all service sites within the delegate network (see #2 above), and a description of steps taken by the delegate, service sites and sub-vendors in response to findings.</li> <li>5. Delegate project records demonstrate the use of data at service site level to monitor other aspects of quality care (e.g., client experience, chlamydia screening rates, timelines and efficiency).</li> <li>6. Delegate has implemented HIT and can demonstrate how its use has increased its ability to monitor the quality of care.</li> </ol>	<table border="1"> <thead> <tr> <th data-bbox="1457 228 1654 329">QFP elements documents by reviewer</th> <th data-bbox="1654 228 1927 329">Quality Rating</th> </tr> </thead> <tbody> <tr> <td data-bbox="1457 329 1654 367">All met +</td> <td data-bbox="1654 329 1927 367"><b>Highly Developed</b></td> </tr> <tr> <td data-bbox="1457 367 1654 404">All met</td> <td data-bbox="1654 367 1927 404"><b>Fully Developed</b></td> </tr> <tr> <td data-bbox="1457 404 1654 472">Half or More met</td> <td data-bbox="1654 404 1927 472"><b>Partially Developed</b></td> </tr> <tr> <td data-bbox="1457 472 1654 573">One or More but less than half</td> <td data-bbox="1654 472 1927 573"><b>Being Developed</b></td> </tr> <tr> <td data-bbox="1457 573 1654 610">None</td> <td data-bbox="1654 573 1927 610"><b>Needs Development</b></td> </tr> </tbody> </table>	QFP elements documents by reviewer	Quality Rating	All met +	<b>Highly Developed</b>	All met	<b>Fully Developed</b>	Half or More met	<b>Partially Developed</b>	One or More but less than half	<b>Being Developed</b>	None	<b>Needs Development</b>
QFP elements documents by reviewer	Quality Rating													
All met +	<b>Highly Developed</b>													
All met	<b>Fully Developed</b>													
Half or More met	<b>Partially Developed</b>													
One or More but less than half	<b>Being Developed</b>													
None	<b>Needs Development</b>													

**9. Project Services and Clients**

Title X Program Requirement	Implementation Strategy	Assessment																		
<p>9.1 Priority for project services is to persons from low-income families (Section 1006(c)(1), PHS Act; 42 CFR 59.5(a)(6)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Data submitted to the Family Planning Annual Report by the delegate demonstrates that more than half of clients served have incomes that are at or below 100% of the Federal Poverty Level (FPL).</li> <li>2. Delegate Service site(s) are located in locations that are accessible for low income persons.</li> </ol>	<p>1. FPAR Data</p> <table border="1" data-bbox="1459 337 1915 412"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Location of Service Sites</p> <table border="1" data-bbox="1459 557 1915 631"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
<p>9.2 Services must be provided in a manner which protects the dignity of the individual (42 CFR 59.5 (a)(3)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and procedures address protection of client dignity which may include:                             <ol style="list-style-type: none"> <li>a.) Protection of client privacy.</li> <li>b.) A patient bill of rights which outlines rights and responsibilities.</li> </ol> </li> </ol> <p><a href="#">LINK TO QFP:</a>                      A core premise of Recommendations for Providing Quality Family Planning Services is that quality services are client-centered, which includes providing services in a respectful and culturally competent manner.</p> <p>Quality Assessment:</p> <ol style="list-style-type: none"> <li>1. The delegate needs assessments (including those of the sub-vendors) describe populations that may be in need of culturally competent care.</li> <li>2. The delegate has written policies and procedures that require their sites and sub-vendors to receive</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1" data-bbox="1459 773 1915 847"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <table border="1" data-bbox="1459 954 1925 1271"> <tr> <td>9.2</td> <td>Quality Rating</td> </tr> <tr> <td>All met +</td> <td><b>Highly Developed</b></td> </tr> <tr> <td>All met</td> <td><b>Fully Developed</b></td> </tr> <tr> <td>Half or More met</td> <td><b>Partially Developed</b></td> </tr> <tr> <td>One or More but less than half</td> <td><b>Being Developed</b></td> </tr> <tr> <td>None</td> <td><b>Needs Development</b></td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.2	Quality Rating	All met +	<b>Highly Developed</b>	All met	<b>Fully Developed</b>	Half or More met	<b>Partially Developed</b>	One or More but less than half	<b>Being Developed</b>	None	<b>Needs Development</b>
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
9.2	Quality Rating																			
All met +	<b>Highly Developed</b>																			
All met	<b>Fully Developed</b>																			
Half or More met	<b>Partially Developed</b>																			
One or More but less than half	<b>Being Developed</b>																			
None	<b>Needs Development</b>																			

	<p>training in culturally competent care. This should include how to meet the needs of the following key populations: LGBTQ, adolescents, individuals with limited English-proficiency, and the disabled.</p> <ol style="list-style-type: none"> <li>3. Documentation (e.g., training records) that demonstrates staff have received training in providing culturally competent care to populations identified in the needs assessment.</li> <li>4. Observation of the clinic environment demonstrates that it is welcoming (i.e., Privacy, cleanliness of exam rooms, ease of access to service, fair and equitable charges for services including waiver of fees for “good cause,” language assistance).</li> <li>5. Client surveys document that clients perceive providers and other clinic staff to be respectful.</li> </ol>	
--	--	--

<p>9.3 Services must be provided without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies, or marital status (42 CFR 59.5 (a)(4)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has written policies and procedures that require their service sites and any sub-vendor sites to provide service without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies or marital status, and to inform staff of this requirement on an annual basis.</li> <li>2. Documentation (e.g., staff circulars, orientation documentation, training curricula) demonstrates that staff has been informed at least once during employment that services must be provided without regard to religion, race, color, national origin, disability, age, sex, number of pregnancies or marital status.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1" data-bbox="1459 889 1919 964"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p>2. Documentation</p> <table border="1" data-bbox="1459 1105 1919 1180"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												



<p>9.4 Projects must provide for social services related to family planning including counseling, referral to and from other social and medical services agencies, and any ancillary services which may be necessary to facilitate clinic attendance (42 CFR 59.5 (b)(2)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate’s needs assessment has documented the social service and medical needs of the community to be served, as well as ancillary services that are needed to facilitate clinic attendance, and identified relevant social and medical services available to help meet those needs.</li> <li>2. Delegate has a written policy that requires service sites and sub-vendors to develop and implement plans to address the related social service and medical needs of clients as well as ancillary services needed to facilitate clinic attendance.</li> <li>3. Current written collaborative agreements with relevant referral agencies exist, for example: child care agencies, transport providers, WIC programs.</li> <li>4. Medical records indicate that referrals were made based on documented specific condition/issues.</li> </ol>	<p>1. Delegate Needs Assessment</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>3. Referral agreements</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>4. Documentation at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						
<p>9.5 Projects must provide for coordination and use of referral arrangements with other providers of health care services, local health and welfare departments, hospitals, voluntary agencies, and health services projects</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has a written policy that requires service sites and sub-vendors to develop and implement plans to coordinate with and refer clients to other providers of health care services, local health and welfare departments, hospitals, voluntary agencies, and health services projects supported by other federal programs.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:																													
Met	Not Met	N/A																																				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																				
Comments:																																						

<p>supported by other federal programs (42 CFR 59.5 (b)(8).</p>	<p>2. Current written collaborative agreements with relevant referral agencies exist, including: emergency care, HIV/AIDS care and treatment agencies, infertility specialists, and chronic care management providers, and providers of other medical services not provided on-site.</p>	<p>2. Delegate Oversight- MOUs</p> <table border="1" data-bbox="1461 228 1917 302"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
<p>9.6 All grantees should assure services provided within their project operate within written clinical protocols that are in accordance with nationally recognized standards of care, approved by the grantee, and signed by the physician responsible for the service site.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has written policies and procedures requiring service sites and sub-vendors to operate within written clinical protocols aligned with nationally recognized standards of care and signed by the medical director or physician responsible for the service site.</li> <li>2. Documentation exists that the delegate monitors all service sites and sub-vendors for the existence of current written clinical protocols that are aligned with nationally recognized standards of care (QFP) and signed by the medical director or physician responsible for the service sites.</li> <li>3. Medical records document that clinical services align with approved protocols.</li> </ol> <p><a href="#">LINK TO QFP:</a> Delegates should follow QFP, which defines “family planning” services (i.e., contraception, pregnancy testing and counseling, achieving pregnancy, basic infertility services, STD services, preconception health services), describes what services should be offered by family</p>	<p>1. Delegate Policies and Procedures</p> <table border="1" data-bbox="1461 667 1917 740"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Documentation of Monitoring</p> <table border="1" data-bbox="1461 886 1917 959"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>3. Medical Records Review</p> <table border="1" data-bbox="1461 1105 1917 1179"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		

	<p>planning providers, and recommends how to provide those services by citing specific Federal and professional medical associations' recommendations for clinical care.</p> <p>Quality Assessment:</p> <ol style="list-style-type: none"> <li>1. Written clinical protocols include the full scope of family planning services as defined in QFP including contraception, pregnancy testing and counseling, achieving pregnancy, basic infertility, STD, and preconception health services.</li> <li>2. Service sites have current clinical protocols (i.e., revised within the past 12 months) that reflect the most current version of Federal and professional medical associations' recommendations for each type of service, as cited in QFP.</li> <li>3. Documentation that clinical staff has participated in training on QFP (e.g., training available from the Title X National Training Centers).</li> <li>4. A review of medical records and/or observational assessment confirms that the recommended services are provided in a manner consistent with QFP including those identified in Tables 2 and 3 on pages 22-23.</li> </ol>	<table border="1"> <thead> <tr> <th>QFP elements documents by reviewer</th> <th>Quality Rating</th> </tr> </thead> <tbody> <tr> <td>All met +</td> <td><b>Highly Developed</b></td> </tr> <tr> <td>All met</td> <td><b>Fully Developed</b></td> </tr> <tr> <td>Half or More met</td> <td><b>Partially Developed</b></td> </tr> <tr> <td>One or More but less than half</td> <td><b>Being Developed</b></td> </tr> <tr> <td>None</td> <td><b>Needs Development</b></td> </tr> </tbody> </table>	QFP elements documents by reviewer	Quality Rating	All met +	<b>Highly Developed</b>	All met	<b>Fully Developed</b>	Half or More met	<b>Partially Developed</b>	One or More but less than half	<b>Being Developed</b>	None	<b>Needs Development</b>
QFP elements documents by reviewer	Quality Rating													
All met +	<b>Highly Developed</b>													
All met	<b>Fully Developed</b>													
Half or More met	<b>Partially Developed</b>													
One or More but less than half	<b>Being Developed</b>													
None	<b>Needs Development</b>													

<p>9.7 All projects must provide for medical services related to family planning and the effective usage of contraceptive devices and practices (including physician's consultation,</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has written policies and procedures requiring service sites and sub-vendors to provide medical services related to family planning as indicated in this section. This should also be included in sub-vendor contracts.</li> </ol>	<p>1. Delegate Policies and Procedures &amp; Contracts</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

<p>examination, prescription, and continuing supervision, laboratory examination, contraceptive supplies) as well as necessary referrals to other medical facilities when medically indicated (42 CFR 59.5(b)(1)).</p> <p>This includes, but is not limited to emergencies that require referral. Efforts may be made to aid the client in finding potential resources for reimbursement of the referral provider, but projects are not responsible for the cost of this care.</p>	<ol style="list-style-type: none"> <li>2. Current written (i.e., updated within the past 12 months) clinical protocols clearly indicate that the following services will be offered to female, male and adolescent clients as appropriate: a broad range of contraceptives, pregnancy testing and counseling, services to assist with achieving pregnancy, basic infertility services, STD services, and preconception health services.</li> <li>3. Breast and cervical cancer screening are available on-site and offered to female clients.</li> <li>4. Written collaborative agreements with relevant referral agencies exist, including: emergency care, HIV/AIDS care and treatment providers, infertility specialists, primary care and chronic care management providers.</li> <li>5. Medical records document that clients are provided referrals when medically indicated.</li> </ol>	<p>2. Clinical Protocols</p> <table border="1" data-bbox="1459 256 1915 332"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>3. Clinical Protocols</p> <table border="1" data-bbox="1459 462 1915 539"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>4. Collaborative Agreements</p> <table border="1" data-bbox="1459 669 1915 745"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>5. Medical Records Review</p> <table border="1" data-bbox="1459 891 1915 967"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																								
Met	Not Met	N/A																								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																								
Met	Not Met	N/A																								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																								
Met	Not Met	N/A																								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																								

<p>9.8 All Projects must provide a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including infertility services and services for adolescents).</p> <p>If an organization offers only a single method of family planning, it may participate as part of a project as long as the entire project offers a broad range of family planning services. (42 CFR 59.5(a)(1)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Medical record reviews demonstrate that clients are provided a broad range of acceptable and effective medically approved family planning methods (including natural family planning methods) and services (including infertility services and services for adolescents).</li> <li>2. Services provided by the delegate and each sub-vendor, when viewed in its entirety provide, a broad range of effective and medically (FDA-approved) methods and services.</li> <li>3. A review of the current stock of contraceptive methods demonstrates that a broad range of methods, including LARCs, are available onsite (optimally) or by referral.</li> <li>4. Clinic protocols state that the following services will be provided to female, male, and adolescent clients as appropriate: contraception, pregnancy testing and counseling, services for achieving pregnancy, basic infertility services, STD services, and preconception health services.</li> <li>5. Delegate documentation indicates oversight of service sites and/or sub-vendors compliance with this section.</li> </ol> <p><a href="#">LINK TO QFP:</a> The QFP notes the special needs of adolescent clients and recommends ways to address those needs, e.g., how to tailor contraceptive counseling for adolescents and ways to make services more youth-friendly.</p> <p>The QFP also notes the need to offer a broad range of contraceptive methods, and that this is an important</p>	<p>1. Medical Records Review</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Range of Services Provided</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>3. Stock at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>4. Documentation at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>5. Delegate Oversight</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															

part of providing client-centered care that respects the individual’s choice. Projects should have a system in place to ensure continuous access to a broad range of FDA-approved contraceptive methods, optimally on-site.

Quality Assessment:

1. All services listed in QFP are offered to female and male clients, including adolescents as specified in clinical protocols.
2. A review of clinic/pharmacy records demonstrates no stock-out of any contraceptive method that is routinely offered occurred during the past 6 months.
3. A review of the service site’s FPAR data demonstrates that the proportion of adolescents served is close to or above the national average (as documented in FPAR).
4. A review of the service site’s FPAR data demonstrates that the proportion of males receiving family planning services is close to or above the national average.
5. A review of medical records confirms that adolescents have been counseled about abstinence, the use of condoms and other contraceptive methods, including LARCs.

QFP elements documents by reviewer	Quality Rating
All met +	<b>Highly Developed</b>
All met	<b>Fully Developed</b>
Half or More met	<b>Partially Developed</b>
One or More but less than half	<b>Being Developed</b>
None	<b>Needs Development</b>

<p>9.9 Services must be provided without the imposition of any durational residency requirement or requirement that the client be referred by a physician (42 CFR 59.5(b)(5)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has a written policy stating that service sites and sub-vendors must provide services without the imposition of any durational residence requirement or a requirement that the client be referred by a physician.</li> <li>2. Written clinic policies explicitly address this requirement.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Documentation at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

<p>9.10 Projects must provide pregnancy diagnosis and counseling to all clients in need of these services (42 CFR 59.5(a)(5)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has a written policy requiring its service sites and all sub-vendors to provide pregnancy diagnosis and counseling services to all clients in need of these services.</li> <li>2. Clinic inventory and medical records review demonstrates that pregnancy testing and counseling is available and offered to all clients in need of these services.</li> </ol> <p><a href="#">LINK TO QFP:</a>  <a href="#">Projects should follow QFP, which describes how to provide pregnancy testing and counseling services, and cites the clinical recommendations of the relevant professional medical associations.</a></p> <p>Quality Assessment:</p> <ol style="list-style-type: none"> <li>1. Written clinical protocols regarding pregnancy testing and counseling are in accordance with the</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table> <p>2. Documentation at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </tbody> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

	<p>recommendations presented in QFP, including reproductive life planning discussions and medical histories that include any coexisting conditions.</p> <ol style="list-style-type: none"> <li>Chart review demonstrates that clients with a positive pregnancy test who wish to continue the pregnancy receive initial prenatal counseling and are assessed regarding their social support.</li> <li>Chart review demonstrates that clients with a negative pregnancy test who do not want to become pregnant are offered same day contraception, if appropriate.</li> <li>Staff have received training on pregnancy counseling recommendations presented in QFP at least once during employment</li> <li>Observation and/or medical record review demonstrates counseling recommendations in accordance with the principles presented in QFP including reproductive life planning discussions.</li> </ol>	<table border="1"> <thead> <tr> <th>QFP elements documents by reviewer</th> <th>Quality Rating</th> </tr> </thead> <tbody> <tr> <td>All met +</td> <td><b>Highly Developed</b></td> </tr> <tr> <td>All met</td> <td><b>Fully Developed</b></td> </tr> <tr> <td>Half or More met</td> <td><b>Partially Developed</b></td> </tr> <tr> <td>One or More but less than half</td> <td><b>Being Developed</b></td> </tr> <tr> <td>None</td> <td><b>Needs Development</b></td> </tr> </tbody> </table>	QFP elements documents by reviewer	Quality Rating	All met +	<b>Highly Developed</b>	All met	<b>Fully Developed</b>	Half or More met	<b>Partially Developed</b>	One or More but less than half	<b>Being Developed</b>	None	<b>Needs Development</b>
QFP elements documents by reviewer	Quality Rating													
All met +	<b>Highly Developed</b>													
All met	<b>Fully Developed</b>													
Half or More met	<b>Partially Developed</b>													
One or More but less than half	<b>Being Developed</b>													
None	<b>Needs Development</b>													
<p>9.11 Projects must offer pregnant women the opportunity to be provided information and counseling regarding each of the following options:</p> <ul style="list-style-type: none"> <li>prenatal care and delivery;</li> <li>infant care, foster care, or adoption; and</li> <li>pregnancy termination.</li> </ul> <p>If requested to provide such information and counseling,</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>The delegate has written policies and procedures requiring its service sites and all sub-vendors to offer options counseling to pregnant women.</li> <li>Written clinical protocols ensure that pregnant clients are offered neutral, factual information, and non-directive counseling about all three pregnancy options except for those options that the woman does not wish to receive information, and that referrals requested by the client are provided to her.</li> <li>Medical records of pregnant clients document that clients were offered the opportunity to be provided with information and counseling about</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p>2. Documentation at Service Site</p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

<p>provide neutral, factual information and nondirective counseling on each of the options, and referral upon request, except with respect to any options(s) about which the pregnant woman indicates she does not wish to receive such information and counseling (42 CFR 59.5(a)(5)).</p>	<p>all three pregnancy options, except those for which the woman did not want to receive information and counseling.</p> <p>4. Medical records of pregnant clients document that referrals were made as requested.</p>	<p>3. Medical Record Review- Information &amp; Counseling</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>4. Medical Record Review- Referrals</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

<p>9.12 Title X grantees must comply with applicable legislative mandates set out in the HHS appropriations act. Grantees must have written policies in place that address these legislative mandates:</p> <p>“None of the funds appropriated in the Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has written policy and procedures requiring their service sites and all sub-vendors to inform their staff periodically that: (a) clinic staff must encourage family participation in the decision of minors to seek FP services, (b) minors must be counseled on how to resist attempts to coerce them into engaging in sexual activities, and (c) State law must be followed requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest. Delegate contracts with sub-vendors include these requirements.</li> <li>2. Documentation (e.g., staff circulars, training curricula) demonstrates that all staff has been formally informed about items 1a-c above at least once during their employment and when laws change.</li> </ol>	<p>1. Delegate Policies and Contracts</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation at Service Site</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>3. Delegate/sub-vendor policies</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p>participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.”</p> <p>“Notwithstanding any other provision of law, no provider of services under Title X of the Public Health Service Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”</p>	<p>3. Medical records of minors document encouragement regarding family participation in their decision to seek family planning services and counseling on how to resist attempts to being coerced into engaging in sexual activities.</p>	<p>4. Medical Record Review-</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
Comments:											

**10. Confidentiality**

Title X Program Requirement	Implementation Strategy	Assessment															
<p><b>10. Confidentiality</b> Every project must have safeguards to ensure client confidentiality. Information obtained by project staff about an individual receiving services may not be disclosed without the individual’s documented consent, except as required by law or as may be necessary to provide services to the</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has a written policy requiring that all service sites and sub-vendors safeguard client confidentiality. Delegate contracts with sub-vendors include this requirement.</li> <li>2. Documentation (e.g., staff circulars, new employee orientation documentation, training curricula) demonstrates that staff has been informed at least once during period of</li> </ol>	<p>1. Delegate Policies and Contracts</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation of Training</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A															
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>															
Comments:																	
Met	Not Met	N/A															
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>															

<p>individual, with appropriate safeguards for confidentiality. Information may otherwise be disclosed only in summary, statistical, or other form that does not identify the individual (42 CFR 59.11).</p>	<p>employment about policies related to preserving client confidentiality and privacy.</p> <ol style="list-style-type: none"> <li>3. Clinical protocols and policies have statements related to client confidentiality and privacy.</li> <li>4. The health records system has safeguards in place to ensure adequate privacy, security and appropriate access to personal health information.</li> <li>5. There is evidence that HIPAA privacy forms are provided to clients and signed forms are collected as required.</li> <li>6. General consent forms for services state that services will be provided in a confidential manner, and note any limitations that may apply.</li> <li>7. Third party billing is processed in a manner that does not breach client confidentiality, particularly in sensitive cases (e.g., adolescents or young adults seeking confidential services, or individuals for whom billing the policy holder could result in interpersonal violence).</li> <li>8. Client education materials (e.g., posters, videos, flyers) noting the client's right to confidential services are freely available to clients.</li> <li>9. The physical layout of the facility ensures that client services are provided in a manner that allows for confidentiality and privacy.</li> </ol>	<p>Comments:</p> <p><b>3. Clinical Protocols</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p><b>4. Service Site- Records System</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p><b>5. HIPAA</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p><b>6. Consent Forms</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <p><b>7. Third Party Billing</b></p> <table border="1"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														
Met	Not Met	N/A																														
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																														

		8. Client Education Materials							
		<table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:
Met	Not Met	N/A							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
Comments:									
		9. Physical Layout							
		<table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:
Met	Not Met	N/A							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							
Comments:									

**11. Community Participation, Education, and Project Promotion**

Title X Program Requirement	Implementation Strategy	Assessment																											
11.1 Title X grantees and sub-recipient agencies must provide an opportunity for participation in the development, implementation, and evaluation of the project by persons broadly representative of all significant elements of the population to be served; and by persons in the community knowledgeable about the community’s needs for family planning services (42 CFR 59.5(b)(10)).	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>The delegate has a written policy and procedures in place for ensuring that there is an opportunity for community participation in developing, implementing, and evaluating the project plan. Participants should include individuals who are broadly representative of the population to be served, and who are knowledgeable about the community’s needs for family planning services.</li> <li>The community engagement plan: (a) engages diverse community members including adolescents and current clients, and (b) specifies ways that community members will be involved in efforts to develop, assess, and/or evaluate the program.</li> <li>Documentation demonstrates that the community engagement plan has been implemented (e.g., reports, meeting minutes, etc.)</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Community Engagement Plan</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>3. Documentation</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p>11.2 Projects must establish and implement planned activities to facilitate community awareness of and access to family planning services (42 CFR 59.5(b)(3)). Each family planning project must provide for community education programs (42 CFR 59.5(b)(3)).</p> <p>The community education program(s) should be based on an assessment of the needs of the community and should contain an implementation and evaluation strategy.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Documentation demonstrates that the delegate conducts periodic assessment of the needs of the community with regard to their awareness of and need for access to family planning services.</li> <li>2. Delegate has a written community education and service promotion plan that has been implemented (e.g., media spots/materials developed, event photos, participant logs, and monitoring reports). The plan: (a) states that the purpose is to enhance community understanding of the objectives of the project, make known the availability of services to potential clients, and encourage continued participation by persons to whom family planning may be beneficial, (b) promotes the use of family planning among those with unmet need, (c) utilizes an appropriate range of methods to reach the community, and (d) includes an evaluation strategy.</li> <li>3. Documentation that evaluation has been conducted, and that program activities have been modified in response.</li> </ol>	<p>1. Delegate Needs Assessment</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Community Education Plan</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>3. Evaluation Activities</p> <table border="1"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p>11.3 Community education should serve to enhance community understanding of the objectives of the project, make known the availability of services to potential clients, and encourage continued participation by persons to whom family planning may be beneficial (42 CFR 59.5 (b)(3))</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>The delegate has developed a community education and service promotion plan that: (a) states that the purpose is to enhance community understanding of the objectives of the project, make known the availability of services to potential clients, and encourage continued participation by persons to whom family planning may be beneficial, (b) promotes the use of family planning among those with unmet need, (c) utilizes an appropriate range of methods to reach the community, and (d) includes an evaluation strategy.</li> <li>There is documentation that the plan has been implemented and evaluated.</li> </ol>	<p>1. Delegate Community Education and Promotion Plan</p> <table border="1" data-bbox="1459 354 1915 430"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Delegate Implementation of Community Education and Promotion Plan</p> <table border="1" data-bbox="1459 698 1915 774"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

**12. Information and Education Materials Approval**

Title X Program Requirement	Implementation Strategy	Assessment												
<p>12.1 Title X grantees and sub-recipient agencies are required to have a review and approval process, by an Advisory Committee, of all informational and educational materials developed or made available under the project prior to their distribution (Section 1006 (d)(2), PHS Act; 42 CFR 59.6(a)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>Delegate has policies and procedures that ensure materials are reviewed prior to being made available to the clients that receive services within the project. If a delegate sub-contracts for services, the delegate must ensure that sub-vendors have a process in place that meets this requirement. Committee meeting minutes (delegate or sub-vendor, as applicable) demonstrate the process used to review and approve materials.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1" data-bbox="1423 1063 1881 1140"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Documentation</p> <table border="1" data-bbox="1423 1279 1881 1356"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

<p>12.2 The committee must include individuals broadly representative (in terms of demographic factors such as race, color, national origin, handicapped condition, sex and age) of the population or community for which the materials are intended (42 CFR 59.6 (b)(2)).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. The delegate has established a project advisory board that is comprised of members who are broadly representative of the population served.</li> <li>2. If a delegate sub-contracts for services, the delegate must ensure that sub-vendors have a process in place that meets this requirement.</li> <li>3. Delegate (and/or sub-vendors) documentation (meeting minutes, lists of board members, etc.) demonstrates this requirement has been met.</li> </ol>	<p>1. Advisory Board</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>3. Documentation</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
<p>12.3 Each Title X grantee must have an Advisory Committee of five to nine members, except that the size provision may be waived by the Secretary for good cause shown (42 CFR 59.6 (b)(1)). The Advisory Committee must review and approve all informational and educational (I&amp;E) materials developed or</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate has policies and procedures addressing this element.</li> <li>2. Delegate maintains and updates Lists/Rosters of Advisory Committee members.</li> <li>3. Delegate maintains Advisory Committee written meeting minutes.</li> <li>4. Advisory committee minutes indicate that the committee is active.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Documentation-Rosters/Lists</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:											
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													
Met	Not Met	N/A																											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																											
Comments:																													

<p>made available under the project prior to their distribution to assure that the materials are suitable for the population and community for which they are intended and to assure their consistency with the purposes of Title X (Section 1006(d)(1), PHS Act; 42 CFR 59.6(a)).</p>		<p>3. Oversight- Delegate Maintains Meeting Minutes</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>4. Documentation- Meeting Minutes</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

<p>12.4 The grantee may delegate I&amp;E functions for the review and approval of materials to sub-recipient agencies; however, the oversight of the I&amp;E review process rests with the grantee.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and procedures indicate responsibility for this element. If the delegate chooses to delegate this activity, delegate policies indicate how the delegate will maintain oversight of the process.</li> <li>2. Delegate documentation indicates that an oversight process has been implemented by the delegate.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>12.5 The Advisory Committee(s) may delegate responsibility for the review of the factual, technical, and clinical accuracy to appropriate project staff; however, final responsibility for approval of the I&amp;E materials rests with the Advisory Committee.</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate Policies and procedures specify if the factual, technical and clinical accuracy components of the review are delegated to project staff, final responsibility for approval of the I&amp;E materials rests with the Advisory Committee.</li> <li>2. If review of factual, technical, and /or clinical content has been delegated, there is evidence of advisory committee oversight and final approval.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Records of Advisory Committee (if delegated)</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				

Pro

- Met/not
- Consult
- QFP ass
- Grantee

<p>12.6 The I&amp;E Advisory Committee(s) must:</p> <ul style="list-style-type: none"> <li>• consider the educational and cultural backgrounds of the individuals to whom the materials are addressed;</li> <li>• consider the standards of the population or community to be served with respect to such materials;</li> <li>• review the content of the material to assure that the information is factually correct;</li> <li>• determine whether the material is suitable for the population or community to which it is to be made available; and</li> <li>• establish a written record of its determinations (Section 1006(d), PHS Act; 42 CFR 59.6(b)).</li> </ul>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and procedures document that the required elements of this section are addressed.</li> <li>2. Meeting minutes and/or review forms document that all required components are addressed.</li> </ol>	<p>1. Delegate Policies and Procedures</p> <table border="1" data-bbox="1425 337 1885 415"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p> <p>2. Documentation</p> <table border="1" data-bbox="1425 553 1885 631"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Met	Not Met	N/A												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

**13. Additional Administrative Requirements**

Program Requirement	Implementation Strategy	Assessment						
<p>13.1 Facilities and Accessibility of Services</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies assure language translation services are readily provided when needed.</li> </ol>	<p>1. Delegate Policies</p> <table border="1" data-bbox="1459 1336 1919 1411"> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						



	<p>5. Educational materials are tailored to literacy, age, and language preferences of client populations.</p>																			
<p>Projects may not discriminate on the basis of disability and, when viewed in their entirety, facilities must be readily accessible to people with disabilities (45 CFR 84).</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies and procedures ensure access to services for individuals with disabilities at their sites and at all sub-vendor sites.</li> <li>2. Delegate maintains documentation of any accommodations made for disabled individuals.</li> <li>3. Project sites are free from obvious structural or other barriers that would prevent disabled individuals from accessing services.</li> </ol>	<p><b>1. Delegate Policies</b></p> <table border="1" data-bbox="1459 375 1921 451"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p><b>2. Documentation</b></p> <table border="1" data-bbox="1459 594 1921 670"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p> <hr/> <p><b>3. Service Site Facility</b></p> <table border="1" data-bbox="1459 813 1921 889"> <thead> <tr> <th>Met</th> <th>Not Met</th> <th>N/A</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Comments:</p>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		

<p>13.2 All grantees, sub recipients and Title X clinics are required to have a written plan for the management of emergencies (29 CFR 1910, subpart E) and clinical facilities must meet applicable standards established by Federal State and local governments (e.g. local fire, building, and licensing codes)</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate disaster plans have been developed and are available to staff.</li> <li>2. Staff can identify emergency evacuation routes.</li> <li>3. Staff has completed training and understands their role in an emergency or natural disaster.</li> <li>4. Exits are recognizable and free from barriers.</li> <li>5. Delegate documentation demonstrates oversight of sub-vendors and service sites compliance with these requirements.</li> </ol>	<p>1. Delegate Disaster Plans</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Staff Identify Evacuation Routes</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>3. Staff Training</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>4. Recognizable Exits</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>5. Delegate Oversight</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> <td style="text-align: center;">N/A</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															
Met	Not Met	N/A																																													
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																													
Comments:																																															

<p>13.3 Projects are required to establish policies to prevent employees, consultants, or members of governing/advisory bodies from using their positions for purposes that are, or give the appearance of being motivated by a desire for private financial gain for themselves or others (HHS Grants Policy Statement 2007, II-7)</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies address this requirement.</li> <li>2. There is evidence of delegate oversight of service sites/sub-vendors for compliance with this requirement.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
<p>13.4 Research conducted within Title X projects may be subject to Department of Health and Human Services regulations regarding the protection of human subjects (45 CFR Part 46). The grantee/sub-recipient should advise their Regional Office in writing of any research projects that involve Title X clients (HHS Grants Policy Statement 2007, II-9)</p>	<p>Evidence that this requirement has been met includes:</p> <ol style="list-style-type: none"> <li>1. Delegate policies address this requirement</li> <li>2. There is evidence of delegate oversight of service sites/sub-vendors for compliance with this requirement.</li> </ol>	<p>1. Delegate Policies</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table> <p>2. Delegate Oversight</p> <table border="1"> <tr> <td>Met</td> <td>Not Met</td> <td>N/A</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="3">Comments:</td> </tr> </table>	Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:			Met	Not Met	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Comments:		
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				
Met	Not Met	N/A																		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Comments:																				